

MONTHLY REPORT
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Nursing Programs

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Preliminary Report on Trip to Norway, Denmark, England, October, 1966.

Mental Retardation

I. Norway:

Norway's services for the Mentally Subnormal are organized into 9 regions. Each region has a Psychiatrist, Social Worker and Psychologist as the core administrative staff. I focused my attention on the Oslo Region in my visit to Norway. The facilities which I visited were:

- 1) Oslo Children's Home and O. P. Dept.
- 2) Grimebakken Home
- 3) Lea
- 4) Ragna Ringdahl Day Home & Sheltered Workshop
- 5) Holmkallen Day Home
- 6) Granbo Hostil
- 7) Orkie Hjem

Overall General Impressions and findings:

1. As far as I could assess the range of services for mental retardation in Norway are perhaps the best of all the regions in Oslo, due very likely to Dr. Vislie and his loyal staff.
2. Programs and facilities varied in their leadership of professionals. There is a heavy weighting toward teaching of social, self-help, work, and learning skills.
3. Wide range of equipment, toys, furniture and activities is utilized for residents.
e.g. special walkers and wheelchairs, play pens, feeding tables, kiddie cars, bicycles, chaise lounges.
4. Play areas are equipped with sand boxes, jungle jims, flowers, shrubs and trees, and storage sheds for toys.
5. Small group activity with individualized attention.
6. Small units of 10 - 16 patients.
7. Home-like atmosphere with pictures, flowers, plants, books, pianos, record players, built-ins, closets or lockers, bulletin boards, upholstered furniture, dining tables for 4, wooden bedsteads, mirrors for each room, drapes.

8. Utilization of Pediatricians on the institution staff for family counseling and teaching. PKU counseling and evaluation.
9. Utilization of General Practitioner in local community for general physical care, with hospitalization in local community hospital.
10. Assessment, evaluation and screening of mentally retarded person for the Oslo Region at O. P. Department of Oslo Children's Home with weekly staffing of the persons seen.
11. Sheltered workshops broken down into 3 main groups:
 - Group I Observation and Evaluation
 - Group II Training
 - Group III Work
12. Basic philosophy - "Why can't we teach the retarded, even if it is only his name so he can know who he is?"
"Many times we have asked ourselves - who is subnormal, the children or we?"
"Every child can do something".
13. Activities are planned by small groups away from the institution whenever possible (at one institution an exchange program with residents of a Danish institute).
14. The use of singing with animation was utilized quite extensively.
15. Heavy concentration on sewing, needlework, weaving, basket weaving, packaging and assembling electrical materials in workshops.
16. Utilization of china, tableclothes and silverware for mealtime and lunches.
17. I saw no scratches, bites, bruises or lacerations.
18. In all of the above facilities, I saw only 4 patients in bed.
19. Some activities at hostel which I visited consisted of
 - 19a.- 1 night - classes by teacher.
 - 19b - 1 night - dancing class.
 - 19c - 1 night - gymnastic class.

Conferences nightly with each girl on an individual basis.

- 19d - weekend activities away from the hostel. Two years ago all took a trip to Denmark.
- 20. Staff Housing and facilities in terms of home-like apartments, and day-rooms like nursing office.

II. Denmark

Denmark's National Service for the Mentally Subnormal is divided into 11 regions administered by an Adm. Medical Director, Social Worker and Teacher. Regionalization began April 1, 1960.

The first institution for the mentally retarded in Denmark was built in 1885.

The institutions for the retarded which I visited in Denmark:

1. Vangede
2. Lellemosgaard
3. Ebberodgard

The Children's Hospital in Vangede has been constructed in connection with Lellemosgaard, an institution for adult retardates. Lellemosgaard is situated 880 yards from the children's hospital with a common kitchen and heating system. The Children's Hospital was opened in February, 1966. At the age of 15 the children will be transferred to Lellemosgaard or into the community if possible.

At Children's Hospital a compact building style has been omitted. Rather, all buildings are small brick houses spread out over the grounds. The high tiled roofs and individual outside playground areas give an impression of a children's village, a deliberate plan to create a home-like atmosphere with wooden beds, closets, bulletin boards, bureau for toys, hobby rooms, day rooms, dining rooms, kitchens and waiting rooms. There are from 12-16 children in each cottage, boys and girls, younger and older children mixed in a cottage. An infant has been placed in some of the cottages. The staff feel this lends itself to a more family relationship for the residents. On one of the cottages I visited the baby was being taken to the infirmary for a T. & A. He was wrapped in colorful bunting, cap, sleepers and booties. All the children gathered around to kiss him goodbye.

A very ample building for physiotherapy, special classrooms, and speech therapy rooms was particularly outstanding. A large pool equipped with overhead pulleys and body slings is utilized. The pool is electrically operated and will lower and raise the floor of the pool, just as a car at a service station.

A public health nurse is employed by the Children's Hospital to visit homes where retarded children reside. Her responsibility is teaching self-help skills, assessing health needs and to make recommendations and provide necessary equipment for improving motor skills. She reports on her home visits at the weekly staff meeting.

The objectives of the institution as outlined in the October, 1966 issue of the A-A-Nyt magazine are to provide:

- 1) A high degree of individual pedagogical care.
- 2) Long range planning of treatment, care, vocational training and education.
- 3) Screening equal rights and opportunities of services for all degrees of development of the handicapped.

There was a definite contrast between Lellemosgaard and Ebberodgard. Lellemosgaard was built within the last five years as a cottage-type, or split level type building. It is well landscaped. The units are small from 16 - 30 patients with hobby rooms, day rooms and craft rooms. In contrast, Ebberodgard has large, old buildings. Some have been remodeled with units housing 40 patients. A new cottage has been built away from the cottage campus for residents working on the farm. I visited large wards with small crowded dayrooms. Patients were milling about, swarmed toward me, and were pushed aside by the attendants. I saw the maximum security unit which also had cells in the basement for the patients.

III. England:

In England I visited 3 facilities for the mentally retarded in the Colchester, Essex County Region. They were:

1. Royal Eastern Counties Hospital
2. Holliwell Lodge (a hostel)
3. Netteswell Workshop

Royal Eastern Counties Hospital has a population of 1730. In addition they maintain and supervise a:

1. Holiday Home for boys
2. Holiday Home for girls
3. Hostel for boys
4. Hostel for girls
5. Lakestone House
6. Kings Meade
7. Colchester Children's Home
8. Brunswick House
9. Bridge Hospital
10. Local Health District Office - Colchester

Here again, the small group concept was utilized in class rooms, activity areas and sheltered workshops.

At the hostel which I visited, the Warden, as he was called, was academically prepared as a teacher, nurse and social worker. The playground was outstanding - An Adventure Playroom, it was called. It had rabbits, gardens, dogs, tree houses, sandboxes, playground equipment, etc. Epileptics were admitted which, after residence, had a profound reduction of seizures and a cut of 50% on anticonvulsants, it was stated.

At the sheltered workshop the programs were organized into 7 areas. Combinations were utilized in scheduling. They were:

1. First level - teaching simple tasks, psychological testing through the use of adaptive materials with emphasis on concreteness, adaptability, and insight (finding out of mistakes).

2. Housekeeping program.
3. Personal grooming skills program.
4. Art Room - painting.
Flower arrangement - residents would bring flowers from home and arrange them.
5. Workshop.
6. Reading and writing classes.

Education of child care staff and nursing staff.

I visited:

1. Emma Hjortes Home (Oslo) to assess the 3-year training program for Milieu Therapists.
2. Personnel H S. (Copenhagen) to gain information of their 3-year program for training of personnel for mentally retarded facilities.
3. Norwegian Post-graduate program for Health Personnel. Oslo

Other facilities which I visited in the area of mental institutions were:

1. State Center for children and adults of Facility of 36 emotionally disturbed children and adolescents - Norway.
2. Glastrup State Institution - Denmark.
3. Severalls Hospital - Colchester.
4. Two hostels for the mentally ill.
5. One Workshop for the mentally ill.

In each of the three countries, England, Norway and Denmark, I visited the Chief Nurse in the Ministry of Health.

The Chief Nurse in Norway and Denmark carries the entire nursing load, with the help of assistants. Her responsibilities entail:

1. Nursing Education.
2. Standards and Qualifications.
3. Public Health Nurses.
4. Psychiatric Nursing.